| For Office Use Only | | | | | | | |
|------------------------|--|--|--|--|--|--|--|
| Receipt/Reservation #: | | | | | | | |



SERENITY FALLS CABIN PERMIT APPLICATION



Applications can be emailed to dnr.pic@alaska.gov; faxed to (907) 269-8901; or presented in person at:

DNR Public Information Center 550 W 7th Avenue, Suite 1360 Anchorage, AK 99501 Phone: (907) 269-8400

Receipt of applications via fax or email <u>DOES NOT</u> guarantee a reservation until full payment is received. Please call the number listed above during business hours (Mon-Fri 10am-5pm) to verify receipt of application and provide payment. Applications will be discarded if payment has not been provided within 3 business days of receipt.

| Name: | Address: | | | | | | | | | | |
|--|---|-----------------------|-----------------------|-----------------------|---------------|------------|---------------------------------|--|--|--|--|
| Phone: Email: | | | | | | | | | | | |
| Total Number in Your Party (Hut max capacity 13): | | | | Adults | | | Children | | | | |
| Preferred Accommodations: Entire Hut or circle bunk(s)/bay(s) below | | | | | | | | | | | |
| | #1 Upper Single #2 Lower Single Bay "A" | #4 Lower Double | #3 Upper Single | #5 Upper Single | | Bay "B" | #7 Upper Single #8 Lower Single | | | | |
| Date In: | # of Nights: | | | | Total Due: \$ | | | | | | |
| Park's Cabin Credit Number to be Applied (if applicable): I have read the cabin information and understand I will be using a rustic and remote cabin without road access. I agree to leave the cabin clean and orderly and will be responsible for any damage to the cabin, associated facilities, or park resources caused by members of my party or myself. I am aware of the normal dangers and hazards associated with backcountry travel in Alaska. Name and address information is considered public record and is available to the public. | | | | | | | | | | | |
| APPLICANT SIGNATURE: | | | | | | DATE: | | | | | |